*U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

For Official Use Only

1. File Number U -

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FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

Revised

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

丽/回/

20041 Through: 12

3. Name and address of person filing.	4. Name, file number, and address of labor organization.			
Name TERRY M. NELSON M. NELSON	Name CARPENTERS DISTRICT COUNCIL OF STANLOUIS;			
	Labor Organization File Number 202637			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 1401 HAMPTON AVE STORY OF THE STREET	Street 1401-(HAMPTON, AVE: 2 17)			
City ST. LOUIS TALL THE TO THE THE THE	City STANCOURS / W. C.			
State Missouri ZIP Code + 4 63139-3159	State Missouria: ZIP Code + 4 63139:3-59			
5. Position in labor organization. EXECUTIVE: SECRETARY TREASURER CONTINUES OF THE S				
The second secon	2004 detected 1900 bbit becomes Care clean New York, and an in the contract of the Advances and			
Enter appropriate data below if, during the past fiscal year, you or your spo				
Enter appropriate data below if, during the past fiscal year, you or your spe (except as specified in the excl	use or minor child directly or indirectly had any of the following interests usions set forth in the instructions):			
Enter appropriate data below if, during the past fiscal year, you or your spond (except as specified in the exclusion A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizations.	use or minor child directly or indirectly had any of the following interests usions set forth in the instructions):			
Enter appropriate data below if, during the past fiscal year, you or your spe (except as specified in the excl	use or minor child directly or indirectly had any of the following interests usions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.			
Enter appropriate data below If, during the past fiscal year, you or your sponding the past fiscal year, you or your sponding the past fiscal year, you or your sponding to the except as specified in the except. A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizate. 6. Name and address of Employer (including trade name, if any).	use or minor child directly or indirectly had any of the following interests usions set forth in the instructions): derived income or other economic benefit of ion represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.			
Enter appropriate data below If, during the past fiscal year, you or your spot (except as specified in the excl. A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizate. 6. Name and address of Employer (including trade name, if any). Name ST. LOUIS CONVENTION AND VISITORS CENTER.	use or minor child directly or indirectly had any of the following interests usions set forth in the instructions): derived income or other economic benefit of ion represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income.			

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the

8-10-05

Date

ZIP Code + 4 63101-1275

undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

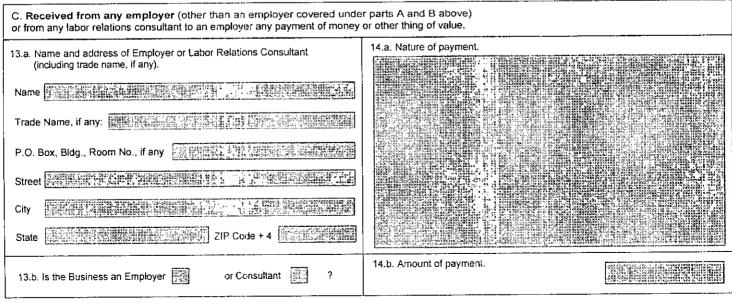
Missouri - GALLE

City

314:644:4800

Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name COMMERCE BANK a. Labor Organization Trade Name, if any: b. Trust P.O. Box, Bldg., Room No., if any c. Employer Street 8000 FORSYTH CLAYTON City ZIP Code + 4 63105-1707 Missouri State 11.a. Nature of such dealing. 10, If 9.b. or 9.c. is checked give trust or employer's name. COMMERCE BANK IS A MONEY MANAGER FOR THE CARPENTERS STRICT COUNCIL SI TRUST FUNDS Name CARPENTERS PENSION TRUST FUND OF ST LOUIS Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1401 HAMPTON AVE 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received City JULY 04 BASEBALL TICKETS State Missouri



File	Nυ	mb	er	U.

Name and address of Business (including trade name, if any).	9. Business deals with:	
Name MORGAN STANLEY TO THE TOTAL THE	a. Labor Organization	
Trade Name, if any:	MINE	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 440 SOUTH LASALLE STREET	c. Employer	
City CHICAGO		
State 1.11区nois 1.10以		
	11.a. Nature of such dealing.	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name CARPENTERS PENSION TRUST FIND OF ST. LOUIS	MORGAN STANLEY IS A MONEY MANAGER CARPENTERS PENSION TRUST FUND OF S	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	Consideration of the constraint of the constrain	
Street 1401, HAMPTON, AVE 300		
City ST. LOUIS THE HEALTH CONTROL OF THE PARTY OF THE PAR	THE PROPERTY OF THE PROPERTY O	
State Missouri State 21P Code + 4 63139-3159	11.b. Approximate dollar value of such dealing.	\$129,393
	12.a. Nature of interest held or income received.	angel pari lang and an ang alakaha aha ang alakaha pang an ang alaka an ang alaka an an an ang ang ang ang ang
	12/3/,04 DINNER AT IFEBE CONFERENCE	
	(SPOUSE INCLUDED)	perioden del est
		A MARCHAEL BERNELL BARRES
		Principles of the land of the
	12.b. Amount.	\$136
		

Name	of Person	Filina	TEDDY	MELSON
INGILIC	011 613011	1 111119	IERRI	NETZON

Part B Continuation Page

Name and address of Business (including trace name, if any).	9. Business deals with:	
THE PROPERTY OF THE PROPERTY O		
Name INVESCO NAM 法相同的 工程 是 是 通行	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 400 W. MARKET, ST. STE: 2500 T. T. STE: 400 M. MARKET	c. Employer	
City LOUISVILLE TO THE TOTAL THE PROPERTY OF T		
State Rentucky Branch ZIP Code + 4 40202, 3349		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name CARPENTERS PENSION TRUST FUND OF ST. LOUIS	INVESCO NAM IS A MONEY MANAGER POR PENSION TRUST FUND OF ST LOUIS	THE CARPENTERS
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 1401 HAMPTON AVE PARTY . PERFECT TO THE PARTY OF T		
City STU LOUISON AND THE PARTY OF THE PARTY		
State Missouri Zing State Missouri ZIP Code + 4 63139-3159	11.b. Approximate dollar value of such dealing.	\$334 308
	12.a. Nature of interest held or income received.	
	12/2/04 DINNER AT IFEP CONFERENCE	
	12.b. Amount.	111 2 1133

Name and address of Business (including trade name, if any).	9. Business deals with:	
Name GHP TO THE STATE OF THE ST	a. Labor Organization	
Trade Name, if any:	Carlo L. Touch	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 111 CORPORATE OFFICE DR J. STE 400 STE	c. Employer	
City EARTH CITY THE CHARGE TO SEE THE CITY THE COURSE OF THE CITY THE COURSE OF THE CO		
State Missouris Missouris ZIP Code + 4 63045-1506		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name CARPENTERS, HEALTH & WELFARE, TRUST FUND	GHP IS THE PROVIDER NETWORK AND UT COMPANY FOR THE CARPENTERS HEALTH	AND WELFARE TRUST
Trade Name, if any:	FUND 22 SECTION 1 SECTION 1 SECTION 2 SECTION	
P.O. Box, Bldg., Room No., if any		
Street 1401 HAMPTON AVE		
City STELOUIS 特別和自由語音音。 人,人名明明自己国民制制		
State Missouris (17.18 - 17.18 ZIP Code + 4 63139-3159)	11.b. Approximate dollar value of such dealing.	114 5476187635
	12.a. Nature of interest held or income received.	
	HOLIDAY GIFT	
	The state of the s	
	12.b. Amount,	\$100

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name CARPENTERS PENSION TRUST FUND	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1401 HAMPTON AVE	c. Employer	
City STELLOUIS STEEL STE		
State Missouri 2012 The ZIP Code + 4 63139-3159		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Participation Services (English Technology)	THE CARPENTERS PENSION TRUST FUNDEN	
Trade Name, if any:	ORGANIZATION) IS INTERESTED	
P.O. Box, Bldg., Room No., if any		
Street St		
City (1.5.) The Company of the Compa		
State 型型设施工作的设施设施设施。 ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	AND THE PROPERTY OF THE PARTY O
	NOV: 1041: ATTENDANCE; ATEIN: IFEBP: CO	NFERENCE
		THE TAXABLE PROPERTY OF THE PR
		THE REPORT OF THE PROPERTY OF
	12.b. Amount.	167 1751 121 168 1751 121

Name and address of Business (including trade name, if any).	9. Business deals with:
Name CARPENTERS HEALTH & WELFARE TRUST FUND	a. Labor Organization
Trade Name, if any:	End by Tarak
P.O. Box, Bldg., Room No., if any	b. Trust
Street 1401 HAMPTON AVE	c. Employer
City ST. LOUIS TO THE PROPERTY OF THE PROPERTY	
State Missouri and The ZIP Code + 4 63139-31591	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Name	THE CARPENTERS HEALTH & WELFARE TRUST FUND IS A TRUST IN WHICH THE CARPENTERS DISTRICT COUCILE .
Trade Name, if any:	(LABOR ORGANIZATION) JIS INTERESTED 77 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
P.O. Box, Bldg., Room No., if any	
Street Street	
City	
State Time In the State In the	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
	NOV 504 - ATTENDANCE ATTINIFIED CONFERENCE TO THE RESERVE TO THE R
	The state of the s
	NOV-04-ATTENDANCE ATTIN IFEBR CONFERENCE SILES
	THE PARTY OF THE P
	12.b. Amount.

Part B Continuation Page

Name and address of Business (including trade name, if any).	9. Business deals with:	
Name CARPENTERS VACATION TRUST FUND OF ST. LOUIS	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1401 HAMPTON AVE:	c. Employer	
City STILLOUIS THE FIRST PROPERTY OF THE PROPE		
State Missouri 5 15 15 2 2 2 P Code + 4 63139 3159		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name 是完全的過程和表示。一定是可能用表示了。	THE CARPENTERS VACATION TRUST FUND WHICH THE CARPENTERS DISTRICT COUC	
Trade Name, if any:	ORGANIZATION) IS INTERESTED	
P.O. Box, Bldg., Room No., if any		
Street NSCIAL WARRENCE TO THE STREET OF THE		
City Carried Control of the Control		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	NOV 04 ATTENDANCE AT IN IFEBP. C	ONFERENCE CONTRACTOR
	12.b. Amount.	\$1,121

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name AMALGATRUST COMPANY	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street ONE WEST MONROET MARKETS	c. Employer	
City CHICAGO TO THE HOLD THE		
State 1111:nois: 1348 - 44 ZIP Code + 4 60603-53017		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name CARPENTERS PENSION TRUST FUND, G. CEPTER CO.	AMALGATRUST COMPANY IS A MONEY MANAGER FOR CAPPENTERS HEALTH & WELFARE TRUST FUND	THE STATE
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 14017 HAMPTON AVET WILL TO THE REPORT OF A PARTY OF THE PARTY O		
City ST. LOUIS AND TO BE A ST. DELEGISTED BY THE ST.		
State Missouri	11.b. Approximate dollar value of such dealing.	\$104.086
	12.a. Nature of interest held or income received.	
	AMALGAMATED BANK OF CHICAGO LABOR ADVISORY	
•	COMMITTEE MEETING HONORARIUM	
•	TOTAL AND THE PROPERTY OF THE	
	THE REPORT OF THE PROPERTY OF	
	HERVALE MEDICAL STREET, A STREET, STRE	
	12.b. Amount.	#### \$272

Name of Person Fining TERRY	Name of Person Filing	TERRY	NELSON
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Part B Continuation Page

Name and address of Business (including trade name, if any).	9. Business deals with:		
Name AMALGATRUST COMPANY	a. Labor Organization		
Trade Name, if any:	<u> </u>		
P.O. Box, Bldg., Room No., if any	b. Trust		
Street ONE WEST MONROE	c. Employer		
City CHICAGO SELLA AUGUSTA			
State Illinois in Factorial ZIP Code + 4 60603-5301			··
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name CARPENTERS PENSION TRUST FUND TO THE PROPERTY OF THE PROP	AMALGATRUSTE COMPANY IS A MONEY MA CARPENTERS HEALTH & WELFARE TRUST	NAGER FOR TH	
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street 1401 HAMPTON AVE			
City ST型LOUIS共同的公司的企业的企业的企业的企业的企业的企业的企业的企业的企业的企业的企业的企业的企业的			
State Missouri ZIP Code + 4 63139-3159	11.b. Approximate dollar value of such dealing.		04,086
	12.a. Nature of interest held or income received		and the track well
	12/14/04 HOLIDAY LUNCH		
	The second secon		
	COLLEGE COLLEG		
	12.b. Amount.		\$27

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name COMMERCE BANK	a. Labor Organization	
Trade Name, if any:	<u> </u>	
P.O. Box, Bidg., Room No., if any	b. Trust	
Street 8000FORSTEN PROPERTY OF THE STREET STREET	c. Employer	
City CTAYTON # SAME TO THE SAME TO THE SAME THE SAME TO THE SAME T		
State Missouri 理解的 《銀柱》是 ZIP Code + 4 6310551707		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name CARPENTERS PENSION TRUST FUND WILL STORE	COMMERCE BANK IS A MONEY, MANAGER F DISTRICT COUNCIL SETRUST FUNDS	OR THE CARPENTERS
Trade Name, if any: The Trade Name, if any: The Trade Name, if any: The Trade Name, if any		
P.O. Box, Bldg., Room No., if any		
Street 1201 HAMPTON AVE THE TO STREET THE TOTAL STREET		
City ST. LOUIS TO THE LOUIS TON		
State Missouri Missouri ZIP Code + 4 63139 3159	11.b. Approximate dollar value of such dealing.	\$777.536
	12.a. Nature of interest held or income received.	
	12.a. Nature of interest held or income received. 11/23/04 HOLIDAY HAM CERTIFICATE	
	12.b. Amount.	注题的中央的时间的第三人称单数形式 第50 图像数据集中的第三人称单数

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name COMMERCE BANK	a. Labor Organization	
Trade Name, if any:	province:	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 8000 FORSYTH	c. Employer	
City CLAYTON AND THE SECOND STATE OF THE SECON		
State Missouries The Education ZIP Code + 4 63105-1707		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name CARPENTERS PENSION TRUST FUND OF ST LOUIS	COMMERCE BANK LISTA MONEY MANAGER F DISTRICT COUNCIL'S TRUST FUNDS	OR THE CARPENTERS
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 1401 HAMPTON AVE		
City STULOUIS 性的關係。		
State Missouri 25 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	11.b. Approximate dollar value of such dealing.	[\$7,77, 536]
	12.a. Nature of interest held or income received.	
	12/1/04 DINNER AT: THE IFEBP CONFER	ENCE
	12.b. Amount.	[

Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name INVESCO-NAM TO THE TRANSPORT OF THE STATE OF THE STA	a. Labor Organization	
Trade Name, if any:	<u> </u>	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 400 W. MARKET ST. STE 2500 F. B. W. STE 1500	c. Employer	
City LOUISVILLE TO A THE COLUMN TO THE COLUMN TO THE COLUMN THE COLUMN TO THE COLUMN TO THE COLUMN		
State Kentucky Will State ZIP Code + 4 40202 3349		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name CARPENTERS PENSION TRUST FUND WAS TANKED	INVESCO-NAM IS A MONEY MANAGER FOR PENSION TRUST FUND OF ST. LOUIS	THE CARPENTERS
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 1401 HAMPTON AVE HAME TO THE WARRENCE TO THE STATE OF THE STATE		
City ST HLOUISH A PHONE HALL TO THE SHIP HE SH		
State Missouri ZIP Code + 4 63139_3159	11.b. Approximate dollar value of such dealing.	\$334,308
	12.a. Nature of interest held or income received.	AND THE RESERVE THE PROPERTY OF THE PROPERTY O
	DEC: 04*USA; MADE: ROLLING COOLER *	CHRISTMAS GIFT
	12.b. Amount.	548

Name of Person Filing TERRY NELSON File Number U-	Name of Person Filing TERRY NELSON	File Number U-
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Name and address of Business (including trade name, if any).	9. Business deals with:	_
Name OPUS INVESTMENT ADVISORS, LLC	a. Labor Organization	
Trade Name, if any:	<u> </u>	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 2321 ROSECRANS AVE., STE 3230	c. Employer	
City EL SEGUNDO		
State California ZIP Code + 4 90245-4980		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	_
Name UNITED BROTHERHOOD OF CARPENTERS PENSION FND	OPUS IS A PENSION INVESTMENT ADVISOR FOR THE UNITED BROTHERHOOD OF CARPENTERS PENSION FUND.	D
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 101 CONSTITUTION AVE, N.W.		
City WASHINGTON, DC		
State ZIP Code + 4 20001-2133	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	HOLIDAY GIFT 2004 - BOTTLE OF WINE	
		NAME AND ADDRESS OF THE OWNER, WHEN
		<u>_</u>
	12.b. Amount. \$12.	2

Name of Person Filing TERRY NELSON		File Number U-	

Name and address of Business (including trade name, if any).	9. Business deals with:	
Name SIERRA INVESTMENT PARTNERS, INC.	a. Labor Organization	
Trade Name, if any:	lemant-year	
P.O. Box, Bldg., Room No., if any	D. Trust	
Street 2625 BUTTERFIELD RD., STE 138 SOUTH	c. Employer	
City OAK BROOK		
State Illinois ZIP Code + 4 60523-1244		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name CARPENTERS PENSION TRUST FUND	SIERRA INVESTMENT PARTNERS IS A MONE THE CARPENTERS PENSION TRUST FUND OF	
Trade Name, if any:	THE CARENTERS PENSION TRUST FUND OF	31. LOUIS
P.O. Box, Bldg., Room No., if any		- Paragraphy (200, 200, 200, 200, 200, 200, 200, 200
Street 1401 HAMPTON AVE.		
City ST. LOUIS		9
State Missouri ZIP Code + 4 63139-3159	11.b. Approximate dollar value of such dealing.	\$75,192
	12.a. Nature of interest held or income received.	
	12/04 HOLIDAY BOTTLE OF WINE	11.74
		*
	12.b. Amount.	\$49